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APPLICATION NO.	FILING DATE	FIRST NAMED INVI			TOR	ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/666,794 09/18/2003 Joel H. Schopp AUS920030042US1 9026									
TITLE OF INVENTION: M	METHOD AND SYSTEM FO	OR SELECTIVE M	MEMORY CO.	ALESC	ING ACROSS MEMO	DRY HEAP BO	OUNDARIES		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE		TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	NO	\$1400			\$300	\$1700		09/08/2006	
EXAMINER		ART UNIT		CL	ASS-SUBCLASS				
BAKER, PAUL A 21					711-163000		,		
1. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1 Mark E. McBurney 2 Dillon & Yudell LLP								
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	THE PATENT	(print c	or type)				
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will appe I a substitute f	ar on the	he patent. If an assign g an assignment.	nee is identifie	ed below, the o	document has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)									
International Business Armonk, New York									
Machines Corporation Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government									
As The following for(s) and		/L	Dozum ant of I	Eng(a):			i.		
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Typed or printed name And yew J. Dillon					Registration l		,634		
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